


CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8) Applicant(s): Cynthia Ann Adiano et al			Docket No. RAL920000041US1	
Serial No. 09/733,737	Filing Date 12/08/2000	Examiner Norman M. Wright	Group Art Unit 2134	
Invention: SECURE ELECTRONIC SOFTWARE DISTRIBUTION				
<p>I hereby certify that this <u>Change of Corr. Add., Auth. to Act in Representative Cap., Cert. of Facsimile</u> <i>(Identify type of correspondence)</i></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>)</p> <p>on <u>2/25/2005</u> <i>(Date)</i></p> <div style="text-align: right; margin-top: 100px;"> <u>Colleen Bulman</u> <i>(Typed or Printed Name of Person Signing Certificate)</i>  <i>(Signature)</i> </div> <p style="text-align: center; margin-top: 50px;"> Note: Each paper must have its own certificate of mailing. </p>				

PTO/SB/122 (06-03)

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF
CORRESPONDENCE ADDRESS
Application**Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450.

Application Number	09/733,737
Filing Date	12/08/2000
First Named Inventor	Cynthia Ann Adiano
Art Unit	2134
Examiner Name	Norman M. Wright
Attorney Docket Number	RAL920000041US1

Please change the Correspondence Address for the above-identified patent application to:

☐ Customer Number :

OR

<input checked="" type="checkbox"/> Firm or Individual Name	James Boice				
Address	Dillon & Yudell				
Address	8911 N. Capital of Texas Highway, Suite 2110				
City	Austin	State	TX	Zip	78759
Country	US				
Telephone	512-343-6116	Fax	703-343-6446		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- ☐ Applicant/Inventor
- ☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or Agent of record. Registration Number 43,001
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name John R. PivnichnySignature John PivnichnyDate 02/24/05Telephone 607-429-4358

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9193 and select option 2.